

**MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/537438

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4	1					
5		1				
6		1				
7		2				
8		2				
9		2				
10		2				
11		2				
12		2				
13		2				
14		2				
15	1					
16		1				
17		1				
18	1	2				
19	1					
20		1				
21		1				
22		3				
23		0				
24		0				
25		0				
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50						
TOTAL IND.	4	↓		↓		↓
TOTAL DEP.	33	←		←		←
TOTAL CLAIMS	38					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						